

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA
ORLANDO DIVISION

In re: RAMON A MUNOZ
VICTORIA MUNOZ

CASE NO.: 6:12-bk-11834-ABB

1507 Sun Meadow Drive
Orlando FL 32824

Debtor(s).

_____ **Chapter 13 Plan** _____x_____ FIRST **Amended Chapter 13 Plan**

COMES NOW, the Debtor(s) and files this Chapter 13 Plan. The projected disposable income of the Debtor(s) is submitted to the supervision and control of the Chapter 13 Standing Trustee, and the Debtor(s) shall pay the following sums to the Chapter 13 Standing Trustee:

PLAN PAYMENTS

<u>Payment Number by months</u>	<u>Amount of Monthly Plan payment</u>
1-12	\$ 2,344.00
13-36	\$ 2,751.00

The Debtor(s) shall pay by **money order**, **cashier's check** or **wage deduction**, to Laurie K. Weatherford, Chapter 13 Standing Trustee, P.O. Box 1103, Memphis, Tennessee 38101-1103. The Debtor(s) name and case number must be indicated clearly thereon and received by the due dates for payments established by court order.

PAYMENT OF CLAIMS THROUGH THE PLAN

Attorney Fees

<u>Attorney Name</u>	<u>Claim Amount</u>	<u>Payment Amount</u>	<u>Payment Month Numbers</u>
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**Law Offices of Monica A Santiago \$2,650.00 balance of fees plus
\$50/month in monitoring fees for months 6-36**

\$4,20.00**\$70.00****1-60****Priority Claims**

The fees and expenses of the Trustee shall be paid over the life of the Plan at the rate allowed as governed by the guidelines of the United States Trustee.

Internal Revenue

Service

\$ 7,534.37

\$157.00

13-59

\$155.37`

60

Name of Creditor	Claim Amount	Payment Amount	Payment Month Numbers
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Mortgage modification**Mediation fee**

350.00

2

Secured Claims

Secured Creditor	Claim Amount	Payment Amount	Payment Month Numbers
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Seterus
(first mortgage loan
on homestead – requesting
mortgage modification
mediation)

\$ 249,610.00

\$ 928.75

1-60

Property address:

1507 Sun Meadow Drive
Orlando Fl 32824

Chase

\$ 63,608.00

\$538.00

1-60

Property address:

2735 Woodstream Circle

Kissimmee FL

Secured Arrearage

<u>Name of Creditor</u>	<u>Claim Amount</u>	<u>Payment Amount</u>	<u>Payment Month Numbers</u>
Chase 2735 Woodstream Circle, Kissimmee	\$4,607.54	\$100.00 \$ 7.54	13-58 59

Secured Gap Payments

<u>Name of Creditor</u>	<u>Claim Amount</u>	<u>Payment Amount</u>	<u>Payment Month Numbers</u>
NONE			

Property to Be Surrendered:

NONE

Valuation of Security:

<u>Name of Creditor</u>	<u>Claim Amount</u>	<u>Payment Amount</u>	<u>Payment Month Numbers</u>
NONE			

Executory Contracts:**The following Executory Contracts are assumed**

<u>Name of Creditor:</u>	<u>Description of Collateral:</u>	<u>Month Numbers:</u>
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NONE

The following Executory Contracts are rejected:

<u>Name of Creditor:</u>	<u>Description of Collateral:</u>
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NONE

Unsecured Creditors: whose claims are allowed shall receive a pro rate share of the balance of the funds remaining after payments to Priority and Secured Creditors are made.

Approximate percentage: **100%**

Property of the Estate reverts in the Debtor(s) upon confirmation of the plan, OR upon completion of all plan payments and the discharge of Debtor(s).

CERTIFICATE OF SERVICE

I/We hereby certify that a true and correct copy of this Chapter 13 Plan of Debtor(s) was furnished by United States mail, postage prepaid, to All Creditors and Parties in Interest as listed on the Court's Matrix as attached, this 11th day of September, 2013.

/s/ RAMON A MUNOZ
Ramon A Munoz

/s/ VICTORIA MUNOZ
Victoria Munoz

/s/MONICA A. SANTIAGO
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